

Adding inferior rectus to inferior oblique recession bilaterally alters horizontal deviation in primary position

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To study the effect of adding inferior rectus recession to inferior oblique recession for correction of esotropia and large V-pattern in cases presented with small angle esotropia in primary position.

Methods: Four patients aged from eight months to three years. Their orthoptic evaluation revealed esotropia in primary position varied from 12 to 20 prism diopter, large V-pattern with bilateral hypertropia. There were bilateral inferior oblique over action from +3 to +4 and bilateral fallen eyes in down lateral gazes. Fundi showed extorsion. Cycloplegic refractions did not show error more than + 3.5 diopter.

Results: Disappearance of esotropia in primary position, no significant pattern, absence of bilateral hypertropia and inferior oblique over action, no fallen eyes.

Conclusion: Adding bilateral inferior rectus recession will correct the bilateral fallen eyes, the large V-pattern and fortunately it will correct the small angle esotropia in primary position in cases presented with V-pattern esotropia.

Biography

Moustafa S Abdelhafez has completed Ph.D. of 24 years from Tanta school of medicine, Egypt. After completing Master Degree, he joined Magrabi Eye Hospitals Group. Within two years, he has passed all exams of fellowship of Royal College of Surgeons, Edinburgh, U.K. Pediatric ophthalmology fellowship had started in Magrabi for 2 years followed by observational fellowship for few months in Bascom Palmer Eye Institute, Miami, USA. He has achieved more than 10,000 pediatric eye and all strabismus surgical procedures. He has presented more than 70 talks all over the world. Now, he is chief of Magrabi pediatric ophthalmology & strabismus group.

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